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TAGS: [EAGR](#) [ECON](#) [PGOV](#) [PINR](#) [SOCI](#) [TBIO](#) [TH](#)

SUBJECT: FLU PANDEMIC PREPAREDNESS: THAILAND

REF: STATE 151549

Classified By: DCM ALEX ARVIZU, REASON 1.4(D).

11. (C/NF) Summary: The responses below are in reply to questions contained in Reftel. In general, Thailand is increasingly capable and increasingly transparent in detecting, reporting, and planning for and responding to avian influenza outbreaks in animals and humans. Although Ministry of Public Health personnel would benefit from more intensive training in pandemic control measures and laboratory diagnostic methods, and the Department of Livestock Development would benefit from technical assistance to improve its information systems management infrastructure, Mission is confident that Thailand would respond rapidly, effectively, and transparently to contain any outbreak of avian influenza within its borders. End summary.

12. (C/NF) The following are Mission responses to questions contained in Reftel:

1Q. Where does preparing for an avian flu pandemic rank among government priorities? Who and what would influence the country to give the issue a higher priority?

1A. This issue has the attention of the highest levels of the Thai government. The Prime Minister has been directly involved in the response, and committees have been formed at various levels of the government to address the issue. Fresh outbreaks among humans would likely raise it to the government's top priority.

1Q. Does the government have a strategy for preventing avian flu from becoming a pandemic and containing a pandemic once it occurs? If the country has a strategy, how capable is it of implementing it?

1A. Thailand has developed and published a plan for both control of avian influenza in poultry and for a response to a human influenza pandemic. These documents are publicly available in English and Thai languages. Substantial resources have been committed to avian influenza containment and pandemic planning. Within the limits of national resources, the Government of Thailand is capable of an effective response to a human influenza pandemic.

1Q. What measures has it taken to date to prepare for a pandemic (stockpiling antiviral medications, conducting surveillance, developing human vaccines, etc.)?

1A. The Government of Thailand now has a national stockpile of 700,000 treatment courses of the antiviral drug oseltamivir. Surveillance and Rapid Response Teams (SRRT) have been trained and organized in every province of Thailand. The National Institute of Health maintains a laboratory capable of processing large numbers of specimens and accurately identifying avian influenza in humans.

1Q. How capable is the country of detecting and responding to an outbreak, especially in rural areas?

1A. The Government of Thailand is capable of identifying clusters of two or more cases of avian influenza in a locality within a few days in most cases. Isolated cases of human infections might go undetected.

1Q. How truthful will the government be in reporting the scope of any outbreak?

1A. It is possible that some under-reporting may take place (new outbreaks could have a ruinous effect on its poultry exports and its tourism industry). Over the past 12-16 months, however, the Government of Thailand has been increasingly transparent in reporting suspected and confirmed animal and human cases of avian influenza. Laboratory-confirmed human cases have been promptly reported to WHO. Likewise, outbreaks of the infection in poultry have been promptly reported to the OIE.

1Q. How willing and capable is the government of imposing quarantines and social distancing measures (closing schools, public gatherings, mass transit)?

1A. The Government of Thailand is willing and capable of establishing quarantine measures on its population if necessary. Contingency plans for such measures have been

established, and the Ministries of Defense, Transportation, and Education have been included in recent pandemic planning meetings.

Q. What are the critical gaps that need to be filled in order to enhance the country's disease detection and outbreak response capabilities? What is the country's greatest need from the US or other international organizations?

A. Additional, more intensive training for Ministry of Public Health physicians and epidemiologists on avian influenza and pandemic control measures is needed. On-site training for sophisticated molecular and serologic laboratory diagnostic methods is also needed. Technical assistance to improve the information systems management infrastructure at the Department of Livestock Development would be useful.

Q. Would government leaders be receptive to messages from US leaders through a bilateral approach, at a multilateral forum such as the UN or APEC, or through bilateral contacts with another country?

A. Yes to all. Thai leaders would be receptive to messages indicating a desire on the part of the US to support and collaborate on efforts to control avian influenza and plan for a human pandemic with technical assistance such as advanced training in laboratory diagnostics. Thailand has assumed a regional leadership role on this issue and has the capability and willingness to function as a regional coordinator and partner for avian flu preparedness activities.

Q. Who is the key "go-to" person or office for USG officials to interface with?

A. Deputy Prime Minister Chaturon Chaisang and Dr. Supamitr Chunsutiwat at the Thailand Ministry of Public Health.

Q. How well-informed is the population about the avian flu threat and about measures they should take to mitigate the threat?

A. The Government of Thailand has undertaken measures to inform the public, including the distribution of printed media, radio, and television programs. Outside of Thai farmers and others directly engaged in applying control measures to halt the avian/avian transmission of the virus, however, the general Thai population is not particularly well-informed about the avian flu threat. In particular, the overall population knows little about the evidence of human-to-human transmission or the possibility of mutation that could launch a human pandemic. The broader Thai public, therefore, has little knowledge about the potential epidemiological implications of avian influenza mutation, the need for rapid response to contain the spread of human-to-human transmission, or the public health measures required as part of that response. A recent US CDC study in Nakhon Province in Northeast Thailand suggested that the population there is informed regarding risk factors for avian influenza infection, but that more work remains to effect real behavioral changes.

Q. Is the host country already working with any international organizations or other countries on the avian flu issue? Are government leaders likely to ask for assistance from the US or other countries?

A. The Government of Thailand has met with numerous political representatives and maintains collaborative relationships with technical experts from several regional countries affected by avian influenza. The Government of Thailand has asked for technical assistance from the US CDC in the past. The US CDC continues to actively collaborate on the issue, particularly by improving surveillance and laboratory diagnostic capacity. The Government of Thailand is not likely to ask for direct financial aid to address this issue, but welcomes technical cooperation and assistance at different levels.

Q. Would its military enforce quarantines?

A. Yes, in addition to local police forces.

Q. What would it want from the US in return for its request efforts?

A. The Government of Thailand would appreciate political support and technical assistance from the US to establish and maintain a regional stockpile of antiviral drugs and personal protective equipment.

Q. What mechanisms are available for providing additional information to the population, particularly in rural areas, and how effective are these measures?

A. National radio and broadcast television are the only media to reach all parts of Thailand, and even that extensive

broadcast range includes small populations whose comprehension of spoken Thai language is minimal. Because all national broadcast radio and TV are government-owned or affiliated, the Royal Thai Government could quickly disseminate emergency information via these national media with a good prospect of reaching a substantial proportion of the population within as little as 48 hours. Many local villages also employ loudspeaker systems to deliver messages to the public. As always, the clarity of the message and the speed with which the Royal Thai Government embraced the need to communicate it would determine the success in any emergency information campaign.

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